DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

Division of Licensing and Protection 103 South Main Street, Ladd Hall Waterbury, VT 05671-2306 http://www.dail.vermont.gov Voice/TTY (802) 871-3317

To Report Adult Abuse: (800) 564-1612 Fax (802) 871-3318

March 8, 2013

Mr. Francis Nolan, Administrator Michaud Memorial Manor 47 Herrick Road Derby Line, VT 05830

Provider #: 0143

Dear Mr. Nolan:

Enclosed is a copy of your acceptable plans of correction for the investigation of a facility self-report conducted on **January 22, 2013.** Please post this document in a prominent place in your facility.

We may follow up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,

Pamela M. Cota, RN

nlaMCotaRN

Licensing Chief

PC:ne

Enclosure



PRINTED: 02/06/2013 FORM APPROVED

Division of Licensing and Protection FEB 2 6 13 STATEMENT OF DEFICIENCIES (X3) DATE SURVEY (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION COMPLETED IDENTIFICATION NUMBER: Licensing and A. BUILDING Protection С B. WING 0143 01/22/2013 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER 47 HERRICK ROAD MICHAUD MEMORIAL MANOR DERBY LINE, VT 05830 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE COMPLETE DATE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG DEFICIENCY) R100 Initial Comments: R100 An unannounced onsite investigation of a facility self-report was conducted by the Division of Licensing and Protection on 1/22/13. Based on information gathered, the following regulatory violations related to the investigation were cited. PLAN OF CORRECTION.
PLEASE SEE
ACCOMPANING
DOCUMENT. R206 V. RESIDENT CARE AND HOME SERVICES R206 SS=E 5.18 Reporting of Abuse, Neglect or Exploitation 5.18.a The licensee and staff shall report any case of suspected abuse, neglect or exploitation to the Adult Protective Services (APS) as required by 33 V.S.A. §6903. APS may be contacted by calling toll-free 1-800-564-1612. Reports must be made to APS within 48 hours of learning of the suspected, reported or alleged incident. This REQUIREMENT is not met as evidenced Based on record reviews and interviews, the home failed to report to Adult Protective Services a suspected pattern of financial exploitation within 48 hours of learning of the suspected incidents (in accordance with 33 V. S. A., Chapter 6903), A total of 12 residents of the home were involved. Findings included: Per a list provided by the home, cash and personal property valued at \$2,104.00 was reported missing by a total of 12 residents beginning in January, 2012 and ending in June, 2012. The facility's written report to Adult Protective Services (APS) was dated 6/6/12. During an interview on 1/22/13 at 9:15 AM, the Administrator confirmed that he/she was

Division of Licensing and Protection

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE PUMINISTRATOR (X6) DATE

2.11.13

MSM511

Division of Licensing and Protection STATEMENT OF DEFICIENCIES (X3) DATE SURVEY (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION COMPLETED **IDENTIFICATION NUMBER:** A. BUILDING B. WING 0143 01/22/2013 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER 47 HERRICK ROAD MICHAUD MEMORIAL MANOR DERBY LINE, VT 05830 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID חו ~(X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX PREFIX DATE REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG **DEFICIENCY**) R206 Continued From page 1 R206 conducting an internal investigation related to a pattern of missing cash and valuables approximately 3-4 months prior to submitting the APS report on 6/6/12. PLANOF CORRECTION, PLEASE SEE ACCOMPANYING DOCUMENT, R207 V. RESIDENT CARE AND HOME SERVICES R207 SS=E 5.18 Reporting of Abuse, Neglect or Exploitation 5.18.b The licensee and staff are required to report suspected or reported incidents of abuse. neglect or exploitation. It is not the licensee's or staff's responsibility to determine if the alleged incident did occur or not; that is the responsibility of the licensing agency. A home may, and should, conduct its own investigation. However, that must not delay reporting of the alleged or suspected incident to Adult Protective Services. This REQUIREMENT is not met as evidenced by: Based on record reviews and interviews, the home delayed the submission of a written report to Adult Protective Services (APS) regarding a suspected pattern of financial exploitation while it was conducting an internal investigation. Findings included: 1. Per a list provided by the home, cash and personal property valued at \$2,104.00 was reported missing by a total of 12 residents beginning in January, 2012 and ending in June, 2012. The facility's written report to Adult Protective Services (APS) was dated 6/6/12. During an interview on 1/22/13 at 9:15 AM, the Administrator confirmed that he/she was conducting an internal investigation related to a pattern of missing cash and valuables approximately 3-4 months prior to submitting the

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Division of Licensing and Protection STATEMENT OF DEFICIENCIES (X3) DATE SURVEY (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION COMPLETED **IDENTIFICATION NUMBER:** A. BUILDING B. WING 0143 01/22/2013 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER **47 HERRICK ROAD** MICHAUD MEMORIAL MANOR DERBY LINE, VT 05830 SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL PROVIDER'S PLAN OF CORRECTION COMPLETE DATE (X4) ID ID PRÉFIX **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG DEFICIENCY) R207 Continued From page 2 R207 APS report on 6/6/12.

Division of Licensing and Protection

MSM511

Michaud Memorial Manor 47 Herrick Road Derby Line, VT 05830 802-873-3152

Plan of Correction for Survey completed on 1/22/13

R206 SS=E 5.18a

1. Michaud Memorial Manor (Vermont Catholic Charities) follows Policy #HR00010 "Abuse, neglect, exploitation, mistreatment....of the residents is not tolerated." (see attached)

All new employees receive a copy of Vermont Catholic Charities Human Resource Policies and Guidelines, and sign a verification of receipt form.

An annual in-service education training session will be presented for all staff on Policy HR00010 and "Resident Rights" and "Recognizing abuse, neglect exploitation and mistreatment of residents". This in-service is to be completed June 13, 2013 and each year thereafter.

A reminder and review of Policy HR # 00010 will be discussed at regularly scheduled staff meetings. This review is to begin March 28, 2013.

All staff is required to report any sense or knowledge of abuse, neglect, exploitation and mistreatment (of any sort, including financial) to the Administrator immediately upon recognition or suspicion of such acts upon a resident.

All new residents are given a personal copy of the "Residential Rights" (see attached). The "Residential Rights Licensing Regulation" poster is posted in the entrance way of the lobby, by the elevator, and on both floors of the facility.

All residents are given the option for the home to maintain a "petty cash spending account". Monies are kept in a secure location.

Residents are encouraged to protect any and all personal valuables.

Discussion about resident rights, abuse, neglect, and exploitation will be discussed with residents at regularly scheduled monthly meetings with the Administrator. Residents will be encouraged to bring to the attention of the Director of Nursing and/or Administrator any sense or experience of abuse, neglect, exploitation or mistreatment. The administrator will meet with residents on February 20, 2013.

2. The Administrator (or his designee), and staff will notify Adult Protective Services within 48 hours of learning of any suspected, reported or alleged incident of financial exploitation.

R206 POL accepted 2120113 JHOSMEREN PMC

R207 SS=E 5.18b

1. Michaud Memorial Manor (Vermont Catholic Charities) follows Policy #HR00010 "Abuse, neglect, exploitation, mistreatment....of the residents is not tolerated." (see attached)

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2. The Administrator (or his designee), and staff will report suspected or reported incidents of any financial exploitation to Adult Protective Services.

Signed

Administrator

Date:

R207 POL accepted 2120/13 JHosmerRN/PMC